



Environment and
Climate Change Canada

Environnement et
Changement climatique Canada

Audit of occupational health and safety at Environment and Climate Change Canada

Final report

December 2019



Canada

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List of acronyms and abbreviations

CLC	<i>Canada Labour Code</i>
CWS	Canadian Wildlife Service
EB	Enforcement Branch
ECCC	Environment and Climate Change Canada
EMC	Executive Management Committee
ESDC	Employment and Social Development Canada
HRB	Human Resources Branch
HOIR	Hazardous occurrence investigation report
MSC	Meteorological Service of Canada
NJOHSPC	National Joint Occupational Health and Safety Policy Committee
OHS	occupational health and safety
OPI	office of primary interest
OSI	office of secondary interest
SBO	senior building officer
STB	Science and Technology Branch
THA/SWP	Task Hazard Analysis and Safe Working Procedures

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Executive summary

The objective of the internal audit was to assess the effectiveness of departmental governance, risk assessment and management controls in ensuring that measures for the occupational health and safety of employees are in place, in compliance with relevant laws, regulations and government policies.

Why it is important

Environment and Climate Change Canada's (ECCC) diversity of activities results in a wide variety of occupational health and safety issues to consider. These include the fieldwork being done in the air, on water, on contaminated soil, under difficult meteorological or emergency conditions. The field and laboratory work also includes complex procedures and the handling of potentially dangerous substances. ECCC therefore requires an occupational health and safety (OHS) program capable of addressing many exposures and requirements.

Legislation is in place to safeguard the health and safety of Public Service employees. Charges can be laid under the [Canada Labour Code, Part II](#) (CLC) or the [Criminal Code of Canada](#). This issue is an important component of the Department's commitment to a high standard of values and ethics. ECCC is responsible for the health and safety of all employees, contractors and visitors on its sites. Foremost, non-compliance with OHS legal standards and requirements increases the health and safety risks for ECCC staff, contractors and visitors. It could also adversely affect ECCC's reputation as an employer and ultimately affect its ability to fulfill its mandate.

What we found

Overall, ECCC is meeting its responsibilities under the CLC. Key elements of the management control framework for OHS are in place and functioning effectively. In questionnaires completed by 101 employees, 94% indicated that they agree or strongly agree that they feel safe in the conduct of their duties, they have the training needed to perform their duties safely and they have the tools and equipment required to fulfill their duties in a healthy and safe manner.

Specifically, the audit found the following.

Governance

- An OHS governance structure, aligned to legislative requirements, has been developed, implemented and communicated, and is understood by supervisors and employees.
- Roles and responsibilities for the day-to-day management of OHS are clearly documented, defined, communicated and understood.
- Improved clarity, guidance and communication are required for work sites with fewer than 20 employees.

Training

- The OHS management team has developed and delivers mandatory OHS training. However, despite the efforts of the OHS management team, as of December 2018, 25% of executives, 46% of managers and supervisors and 32% of all employees have not completed the mandatory training.
- Overall, employees indicated that they have received the job-specific training needed to complete their tasks in a healthy and safe manner; however, there is a lack of direction on how branches should track and monitor OHS training.

Workplace inspections and investigations

- OHS investigations and inspections are taking place as required under the CLC; however, further clarity on the tracking, monitoring and follow-up of recommendations is required.
- The data in the OHS data management system is well maintained and accurate; however, the level of analysis could be enhanced to identify and report on geographic and branch OHS trends.

Management action is required to:

- Provide clear direction and guidance given to work sites with fewer than 20 employees
- Remind executives of their mandatory training requirements and report non-compliance to executive management
- Review options to document the accountability and responsibility of executives, supervisors and managers to complete mandatory training and ensure that employees have completed the mandatory training
- Address the inconsistencies across branches in tracking and monitoring job-specific training
- Revise the OHS Governance Framework to articulate clearly accountability for following up on investigation and inspection recommendations
- Provide clear directions for the consistent monitoring, implementation and follow-up on investigation and inspection recommendations
- Strengthen how ECCC leverages OHS data to identify and report on trends and areas of high risk

Management agrees with the recommendations and has developed an action plan that will strengthen the management control framework supporting ECCC OHS operations.

1. Introduction and background

Environment and Climate Change Canada's (ECCC) diversity of activities results in a wide variety of occupational health and safety issues to consider. These include the fieldwork being done in the air, on water, on contaminated soil, under difficult meteorological or emergency conditions. The field and laboratory work also includes complex procedures. ECCC therefore requires an occupational health and safety (OHS) program capable of addressing many exposures and requirements.

The [*Canada Labour Code, Part II*](#) (CLC) requires federal employers, including government departments, to control OHS risks attached to work activities under their authority. Enforcement and administration of the CLC is the responsibility of the Labour Program at Employment and Social Development Canada (ESDC). The purpose of the CLC, as defined under section 122, is to prevent accidents and injury to the health of employees arising out of, linked with, or occurring in the course of their employment. ECCC's general and specific OHS obligations or duties, as an employer, are described in sections 124 and 125 of the CLC.

The CLC informs senior management on their need to demonstrate due diligence regarding the safety and health of departmental employees. Employers have specific duties in regards to each workplace they control and every work activity under their authority that occurs in a workplace that is beyond their control. These duties include, but are not limited to:

- information
- training and instruction
- supervision
- providing prescribed safety material
- investigating, recording and reporting all accidents
- establishing a health and safety committee or policy committee
- identifying specific work requirements
- carrying out monthly inspections so that every part of the workplace is inspected at least once a year

On a day-to-day basis, OHS is the responsibility of every employee and supervisor. Under the CLC employees are required to perform their duties in a healthy and safe manner. This includes following OHS protocols and practices, taking all reasonable and necessary precautions and reporting to the employer any incidents or potentially dangerous situations. In addition, supervisors are responsible under the CLC for providing direction on health and safety (including written directives), providing required tools, equipment and facilities for the safe conduct of work, ensuring training is completed and responding to reports made by employees.

ECCC is committed to providing a safe and secure workplace for its employees. The Human Resources Branch's (HRB) role is to provide functional authority to the Department on OHS. The OHS Division under the direction of the HRB has a responsibility to put in place a robust OHS

program. The OHS Division aims to promote and maintain the highest degree of occupational health, safety and well-being for all employees. The key to this commitment is the prevention of injury and illness through the provision of education, information and advice on all aspects of work place health and safety.

OHS at ECCC is managed at the national level by the OHS Division and a team of OHS advisors who:

- support policy development
- provide guidance and support to employees and supervisors
- provide mandatory training on the roles, responsibilities and rights under the CLC to employees, managers, and local OHS committees
- provide OHS oversight (for example, committee governance)
- coordinate national initiatives
- lead ECCC's legislative reporting requirements (for example, injury frequency)

Occupational health and safety governance structure

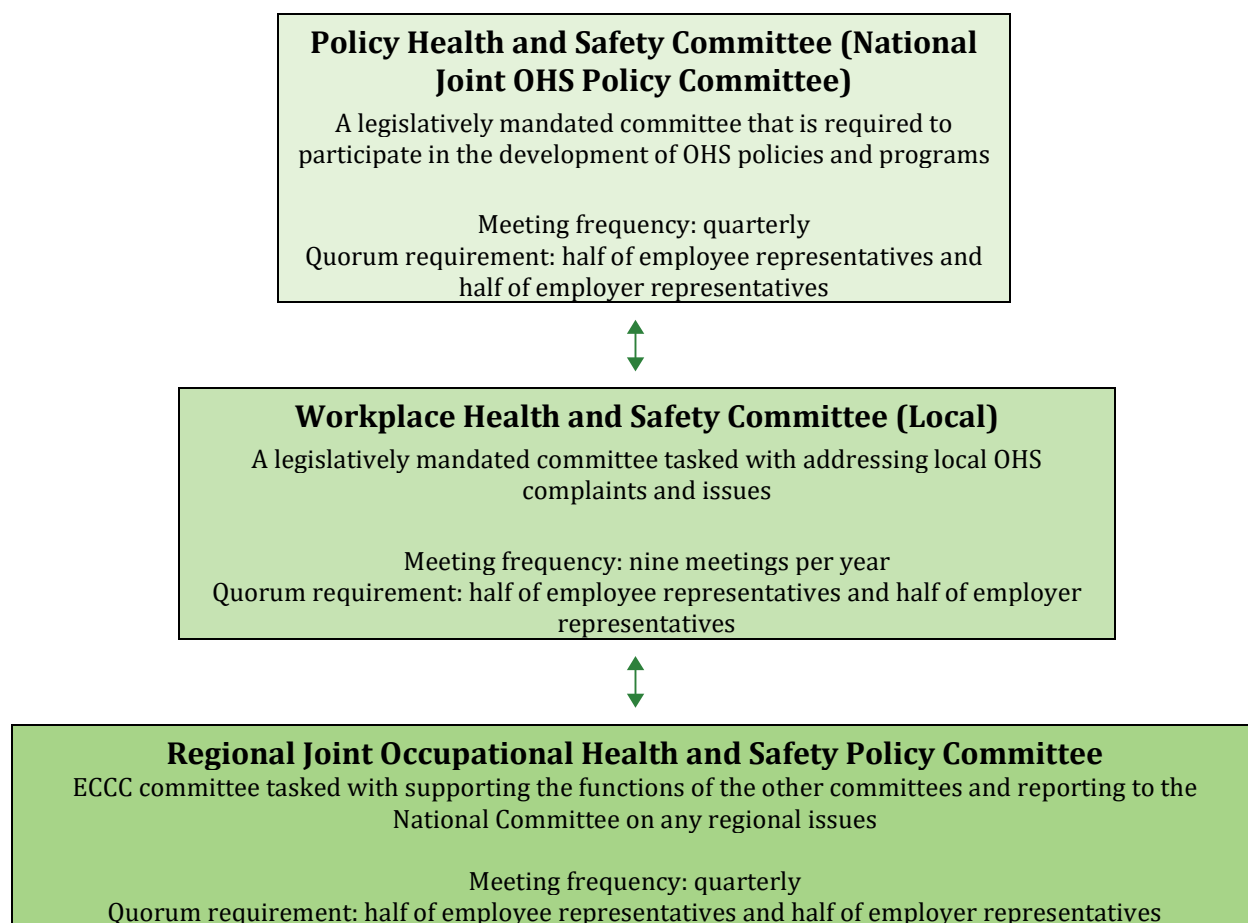
Committees at the national, local and regional levels¹ support the OHS functions at ECCC. The following provides an overview of these committees and their operating structure.

The foundation of the ECCC OHS governance framework is the committee structure requirements outlined in the CLC. The code mandates the establishment and maintenance of a national Policy Health and Safety Committee and Local Health and Safety Committee at all sites where ECCC has more than 20 employees². These committees work collectively to establish OHS policy and processes, and implement the OHS requirements outlined in the CLC, including training, inspections, investigations, reporting, monitoring and data management. To support this work, ECCC has established an additional regional committee to provide region-specific guidance and direction.

Figure 1 provides details on the three committees.

¹ For purposes of providing a clear linkage between the committees and the CLC, this document refers to the committees as they are named in the CLC, with their ECCC titles in brackets.

² For sites with fewer than 20 employees, ECCC must appoint an OHS representative with the same roles and responsibilities as the local committee.

Figure 1: occupational health and safety committee governance

OHS governance at ECCC is managed along geographic lines, with specific roles and responsibilities for each region and ECCC building. This structure is aligned to the requirements of the CLC. However, each branch also plays an integral role in the health and safety of employees under its responsibility. They must provide job-specific directives and up-to-date, general oversight and ensure that local office employees have the training and equipment needed to perform their duties in a healthy and safe manner.

In the context of the constant evolution of ECCC's OHS program and its related commitments, obtaining a regular, independent and impartial view of the activity to date is important. This audit was required because:

- the ECCC OHS management framework was last audited more than nine years ago (2009 to 2010)
- ECCC needs to continue to improve its OHS program

The audit is designed to confirm the current state of the OHS program at the departmental and the site level.

2. Objective, scope and methodology

Objective

The objective of the audit was to assess the effectiveness of departmental governance, risk assessment and management controls in ensuring that measures for the occupational health and safety of employees are in place, in compliance with relevant laws, regulations and government policies.

Scope

The audit examined OHS initiatives and activities at the site level between January 1, 2017 and December 31, 2018. It focused particularly on high-risk duties in the field and laboratories, generally undertaken by employees in the Enforcement Branch (EB), Canadian Wildlife Service (CWS), Meteorological Service of Canada (MSC) and Science and Technology Branch (STB).

The scope of the audit excluded the following:

- **accessibility and accommodation**, since this area is in transition and has its own distinct policy requirements
- **physical security**, because it is managed through its own distinct policy requirements (for example, [Policy on Government Security](#)) and is separate from OHS
- **mental health**, because it is an emerging area of OHS and central agencies have not yet established a policy direction or standards against which to assess departmental performance
- **violence and harassment**, because they are covered under a different section of the *Canada Labour Code*
- **ergonomics and ergonomics related OHS injuries**, because although they are an important area for the Department, they do not pose the same level of risk of serious injuries or fatalities that is present in the work being undertaken in laboratories and in the field

Methodology

During the planning phase of the audit, the audit team developed lines of enquiry and related audit criteria (see [Appendix A](#)), based on a risk assessment.

The audit methodology (see [Appendix B](#) for details) included:

- a review of relevant documentation and systems, such as policies, directives, enforcement plans, reports and performance measurement information and the 2009 report of the ECCC [Audit of Occupational of Health Safety Management Framework](#)
- interviews with senior management, the OHS management team and employees (see [Appendix C](#) and [Appendix D](#) for details)

- on-site observations during regional visits
- walk-throughs of the processes in place
- file reviews and system validation checks

As part of this engagement, the audit team conducted eight site visits (five with more than 20 employees, three with fewer than 20 employees) of the 90 ECCC work sites across the regions. The sample was selected judgmentally to ensure geographic coverage, a staff complement that includes employees working in high-risk areas (EB, CWS, MSC and STB), proximity to a high-risk environment (for example, waterways) and proximity to smaller offices with fewer than 20 employees.

Internal Audit Opinion

In my professional opinion or judgment, sufficient and appropriate procedures were performed and evidence gathered to support the accuracy of the audit conclusion. The audit findings and conclusion are based on a comparison of the conditions that existed as of the time of the audit, against established criteria that were agreed upon with management. The audit conforms to the International Standards for the Professional Practice of Internal Auditing, as supported by the results of the quality assurance and improvement program.



Paule-Anny Pierre
Chief Audit Executive

3. Findings, recommendations and management responses

3.1 Governance committees

Findings: An OHS governance structure, aligned to legislative requirements, has been developed, implemented and communicated, and is understood by supervisors and employees.

What we examined

The audit assessed if ECCC has documented and defined its committee governance structure and has communicated it to supervisors and employees. The audit also examined whether supervisors and employees understand the OHS governance structure.

Why is it important? In keeping with legislative requirements and general best practices, a well-communicated and effective OHS governance structure is important. It will help ensure that managers and employees can maximize safety performance throughout the organization. This is achieved through activities such as the development of policies and procedures, monitoring, training and inspections. All of these activities are enabled through relevant health and safety committees and their underlying governance structures.

What we found

The OHS committee governance structure is outlined in the OHS Governance Framework. [Appendix E](#) provides a high-level chart of the OHS governance structure. The framework clearly sets out the roles and responsibilities of each committee. It is made available to employees and is covered as part of mandatory OHS training for all employees. The structure is aligned with legislative requirements (national and local committees). It includes the implementation of a non-legislated regional committee, which provides ongoing support at a higher level for local committees.

Supervisors and employees responding to the questionnaire said that they feel they have a better understanding of the role of the local health and safety committee (4.4/5) than of the role of the national and regional committees (3.5/5). The variance in understanding is expected as employees engage almost exclusively with their local committee.

3.1.1 ECCC National Joint OHS Policy Committee

What we examined

The audit team examined whether ECCC was meeting its legislative requirements to establish and maintain an effective national joint policy health and safety committee. To make this assessment, we reviewed the Department's OHS Governance Framework and committee meeting minutes, and interviewed members of the committee, ECCC executives, OHS leaders, managers and supervisors and employees.

Why is it important? Under section 134 of the CLC, all employers under federal jurisdiction with more than 300 employees must establish a policy health and safety committee to address health and safety matters that apply to the work, undertaking and business of the employer. The committee must:

- participate in the development of OHS policies and programs
- dispose of matters pertaining to OHS
- provide support as necessary inquires, investigations, studies and inspections pertaining to OHS

The committee must meet quarterly. Half the members must be management and the other half must be non-management representatives.

What we found

Overall, ECCC complies with the requirements outlined in section 134 of the CLC. To meet this requirement, the Department established the National Joint OHS Policy Committee (NJOHSPC). The committee implemented terms of reference that are aligned with the legislative requirements. In keeping with the CLC requirement, half of the committee members represent management and half represent the employees. A review of committee meeting minutes found that the committee convenes the minimum four times per year and is meeting quorum requirements. The topics covered in the meetings are aligned with the requirements outlined in the CLC.

Table 1: compliance overview of the ECCC National Joint Occupational Health and Safety Policy Committee

Work site	Terms of reference in place	Minimum number of meetings		Meeting minutes completed		Meeting quorum	
	FY 2017 to 2018	2017	2018	2017	2018	2017	2018
National Joint OHS Policy Committee	✓	✓	✓	✓	✓	✓	✓

Additionally in 2018, ECCC held a national OHS symposium to bring together OHS representatives and leaders from across the country to discuss key issues, ongoing challenges and best practices. Feedback from the symposium was positive. Attendees saw the symposium as a new best practice that provided ECCC with an opportunity to assess its OHS practices at a strategic level and develop an action plan for priority items.

3.1.2 Local workplace health and safety committees

What we examined

The audit examined if ECCC was meeting its legislative requirements to establish and maintain an effective local health and safety committee in work sites with more than 20 people. To make this assessment, the audit team reviewed the Department's OHS Governance Framework and committee meeting minutes, interviewed members of the committees, ECCC executives, OHS leaders, managers and supervisors and employees and conducted site visits.

Why is it important? Under section 135 of the CLC, for each workplace with more than 20 employees, ECCC must establish a committee where half of the members represent management and half are non-management representatives. The committee at each site must meet at least nine times per year. It is tasked with:

- addressing local OHS complaints
- establishing a monitoring program for the prevention of incidents and for training employees
- participating in investigations and inspections
- ensuring that adequate records are kept
- monitoring the program that provides personal protective equipment, clothing, devices or materials

What we found

Overall, ECCC complies with the requirements outlined in section 135 of the CLC. The OHS team has developed a standardized terms of reference aligned to the CLC, which local health and safety committees across the country can use. Five work sites with more than 20 employees were implementing the terms of reference at the time of the audit team's site visit. Each of the five committees reviewed met the minimum number of times in 2017 and 2018 and made the meeting minutes available on the ECCC intranet site. In reviewing the meeting minutes of the committees, it was found that the topics covered were aligned with the requirements outlined in the CLC. For local health and safety committees to meet the CLC quorum requirements, at least two members must be present, at least half of the attendees must be non-management representatives and at least one attendee must represent management. The audit team's review found that overall, local health and safety committees meet this requirement.

To ensure committee compliance, the OHS management team requires that each local health and safety committee submit an annual report outlining how it has met its legislative requirements. The OHS management team reviews the reports and consolidates them to support the annual departmental reporting requirements.

Table 2: compliance overview of local health and safety committees

Work site	Terms of reference in place	Minimum number of meetings		Meeting minutes completed		Meeting quorum	
	FY 2017 to 2018	2017	2018	2017	2018	2017	2018
Site A	✓	✓	✓	✓	✓	✓	✓
Site B	✓	✓	✓	✓	✓	✓	✓
Site C	✓	✓	✓	✓	✓	✓	✓
Site D	✓	✓	✓	✓	✓	✓	✓
Site E	✓	✓	✓	✓	✓	✓	✓

3.1.3 Regional joint occupational health and safety committees

What we examined

The audit examined if ECCC was meeting its policy requirements to establish and maintain effective regional joint health and safety committees. To make this assessment, the audit team reviewed the Department's OHS Governance Framework and committee meeting minutes and interviewed members of the committees, ECCC executives, OHS leaders, managers and supervisors and employees.

Why is it important? In addition to the two legislatively required committees, ECCC established a regional health and safety committee for each of the Department's regions³. Half of the members represent management and half are non-management representatives. The committees must meet quarterly. They are tasked with:

- supporting the functions of the other committees
- reporting to the national committee on any regional issues
- establishing a method for maintaining action items brought before the Committee
- putting in place a reporting framework and process

What we found

Regional joint health and safety committees have established terms of reference that are consistent across the country and aligned with the templates and direction provided by the OHS management team. Of the 40 required meetings across the country, 35 (87.5%) took place between 2017 and 2018 and meeting minutes were documented. Most of the missed meetings, 3 of 5 (60%), were in one region. Management is aware of the issues and is working with the region to improve future

³ The National Capital Region does not have a regional health and safety committee. This is due to the proximity to the NJOHSPC, which is based in the NCR and would include a similar membership list.

performance. Additionally, 32 of the 35 (91.4%) meetings held had the required quorum. In each of the instances where quorum was not met, the requirement number of employee representatives were not present. This issue is the result of scheduling challenges and holidays during December (2 of 3) and July (1 of 3) and is not a systemic or ongoing issue. While there were instances of non-compliance with internal ECCC policy, the audit found that overall, the regional joint health and safety committees meet their obligations.

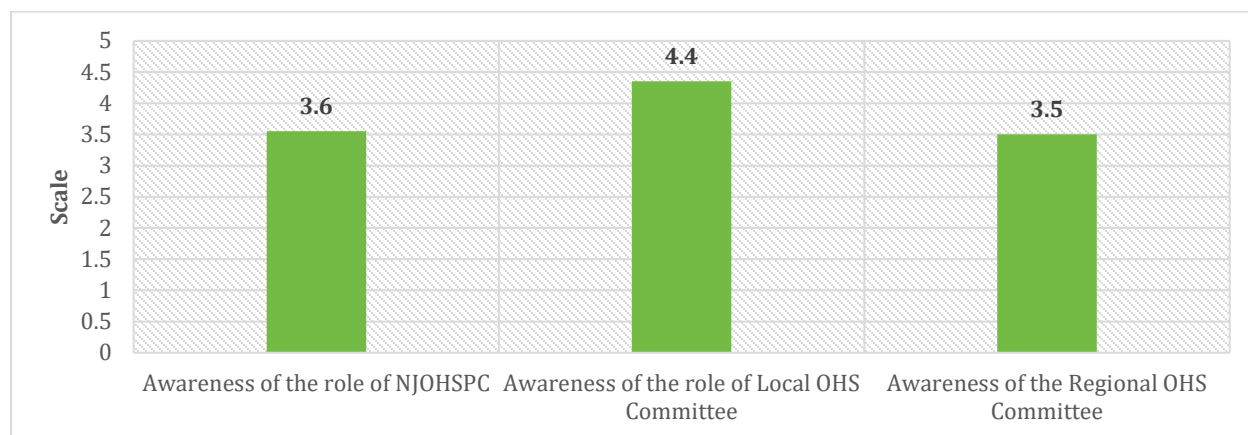
Table 3: compliance overview of regional joint health and safety committees

Work site	Terms of reference in place	Minimum number of meetings		Meeting minutes completed		Meeting quorum (35 of 40 meetings held)	
	FY 2017 to 2018	2017	2018	2017	2018	2017	2018
Region 1	✓	3 of 4	✓	✓	✓	✓	3 of 4
Region 2	✓	✓	✓	✓	✓	✓	✓
Region 3	✓	3 of 4	2 of 4	✓	✓	2 of 3	✓
Region 4	✓	✓	✓	✓	✓	3 of 4	✓
Region 5	✓	✓	3 of 4	✓	✓	✓	✓

3.1.4 What we heard from supervisors

Based on the results obtained from supervisor interviews, there is a perception that local occupational health and safety committee roles are well understood and clear. Supervisors acknowledged that they were less aware of both national and regional committee roles. This is in keeping with the audit's expectations, since the majority of their interactions are with their local committee, which passes along the information from the national and regional committees.

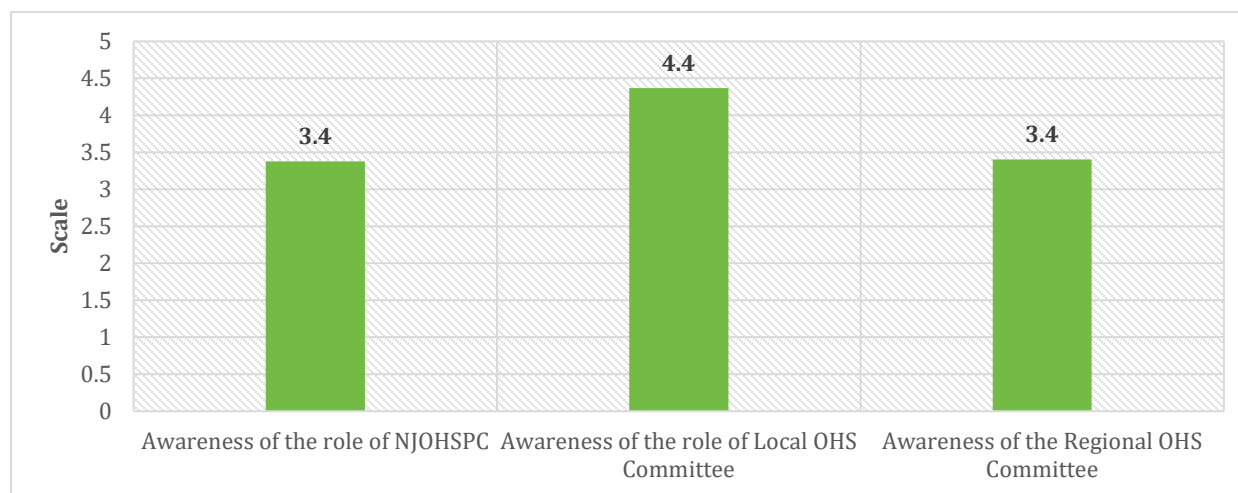
Figure 2: awareness of OHS committee role – supervisors



What we heard from employees

The audit team observed nearly identical results for employee responses. Perceived awareness of the role of the local occupational health and safety committee was significant. However, perceived awareness for the roles of the national and regional committees was as expected, because their interactions are almost exclusively with the local committees.

Figure 3: awareness of OHS committee role - employees



3.2 Roles and responsibilities

Findings: Roles and responsibilities for the day-to-day management of occupational health and safety are clearly documented, defined, communicated and understood.

What we examined

The audit looked at whether the roles and responsibilities for the employees are clearly documented, defined, communicated and understood across the Department. The audit team reviewed the Department's OHS Governance Framework and other supporting documentation, interviewed members of the various governance committees, ECCC executives, OHS leaders, managers and supervisors and employees and conducted site visits.

Why is it important? On a day-to-day basis, OHS is the responsibility of every employee and supervisor. These responsibilities are codified in sections 124 and 125 of the CLC and supported by specific departmental policy and direction. Under the CLC, supervisors are responsible for:

- providing direction on health and safety, including written directives
- providing required tools, equipment and facilities for the safe conduct of work
- ensuring that training is completed
- responding to reports made by employees

Employees are required to perform their duties in a healthy and safe manner. This includes following OHS protocols and practices, taking all reasonable and necessary precautions and reporting to the employer any incidents or potentially dangerous situations.

Each branch also plays an integral role in the health and safety of employees under its responsibility. This includes ensuring that job-specific directives are provided and up-to-date, providing general oversight and ensuring that local office employees have the training and equipment needed to perform their duties in a healthy and safe manner.

What we found

In addition to what is outlined in the CLC, ECCC has documented and defined the roles and responsibilities for the day-to-day management of OHS in its OHS Governance Framework. The roles and responsibilities are covered in detail as part of mandatory training for employees and supervisors. Additionally, for job-specific duties, the roles, responsibilities and safe operating procedures are detailed in depth as part of the Task Hazard Analysis and Safe Working Procedures (THA/SWP). Applicable branches are responsible for maintaining and updating these procedures. However, the OHS management team monitors and tracks the procedures to ensure that they are reviewed at minimum every three years.

Supervisors must take specific training targeted at ensuring that they understand their roles and responsibilities regarding OHS. They are also responsible for ensuring ongoing communication and the engagement of their branch leadership. Supervisors from across the country who responded to the questionnaire feel that they have a high degree of clarity regarding their roles and responsibilities (4.5/5) and sufficient support and training to carry out these roles and responsibilities and address OHS concerns raised with them (4.3/5). They are also clear on how to escalate and report issues (4.6/5).

From an employee perspective, in addition to the CLC and mandatory training, employees are required to review annually the THA/SWP pertaining to their duties. The practices in place to ensure that this is carried out varies slightly. Some branches require employees to review and sign off that they have done so as part of the annual performance appraisal. Other branches tie the review to when employees are in the field. In the questionnaire, most employees stated that they had reviewed with the THA/SWP in the past year (4.4/5). Fewer employees indicated that the THA/SWPs are up-to-date and reflect current practices (3.9/5).

Additionally, employees feel they understand how to report the issues (4.4/5), to whom they should report an incident (4.6/5) and to whom to report an issue or concern (4.4/5). As well, they are confident that issues or concerns are dealt with in a timely and effective manner (4/5).

OHS governance at ECCC is managed along geographical lines, with specific roles and responsibilities for each region and ECCC building. This structure is aligned with the requirements for the CLC. However, the Department operates under a centralized model, where direct supervisors may have employees dispersed across the country. This presents challenges for co-ordination and communication on emerging OHS matters. To mitigate this challenge, ECCC

established an Inter-Directorate Management Committee for Field Operations that includes branches (CWS, STB, EB, MSC) with field staff. An advisor from the OHS management team provides technical support. This committee provides a forum for management from across the country to:

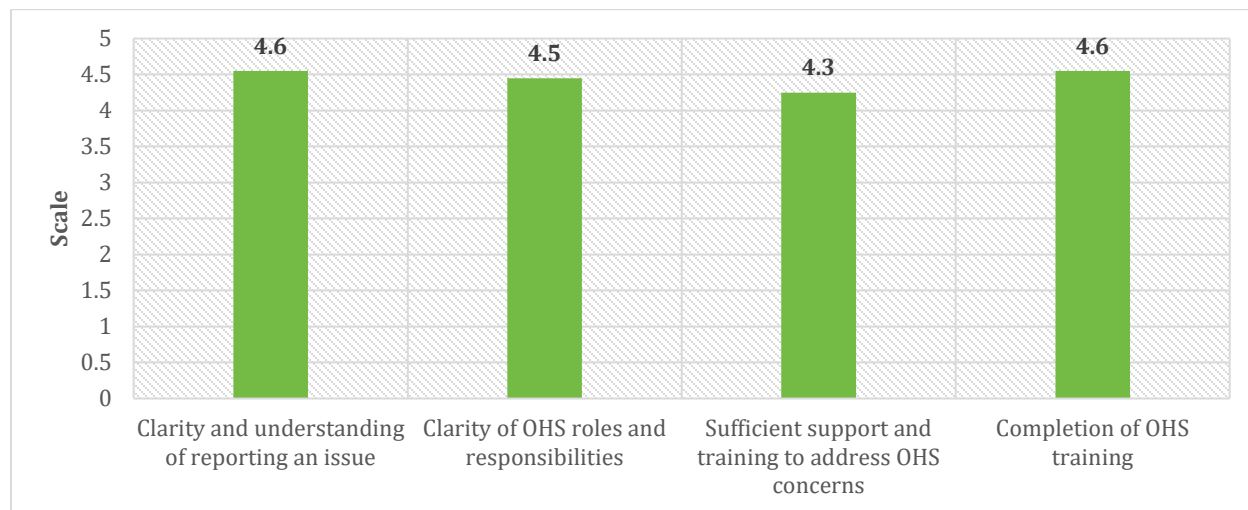
- discuss emerging job-specific OHS issues, such as new equipment
- discuss comparable practices
- improve coordination
- maintain and promote ongoing communication on OHS

What we heard from supervisors

As shown in Figure 4, supervisors indicated on the questionnaire that they think the following:

- their roles and responsibilities are clearly defined
- they understand their roles and responsibilities
- they have completed the required OHS training
- the process for reporting OHS issues is clear
- they understand fully the process for reporting OHS issues
- they have the support and training needed to address the OHS concerns brought to their attention

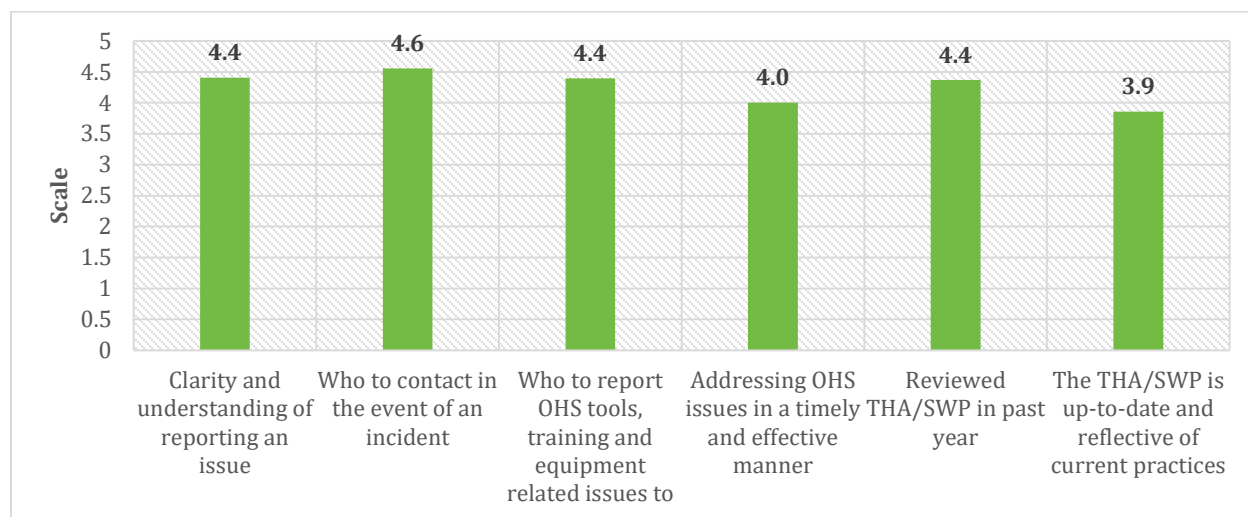
Figure 4: clarity and scope of roles and responsibilities – supervisors



What we heard from employees

Similar to the supervisor results, employees feel that they understand their roles and responsibilities regarding OHS and the formal reporting structure when OHS issues arise. Some employees noted that they perceived the length of the THA/SWP process could be reduced.

Figure 5: clarity of roles and responsibilities, reporting structure and effectiveness – employees



3.3 Work sites with fewer than 20 employees

Findings: Improved clarity, guidance and communication are required for work sites with fewer than 20 employees.

What we examined

The audit examined the extent to which ECCC is meeting its requirements in appointing OHS representatives in work places with fewer than 20 employees. As well, the audit team looked at whether those representatives are carrying out their required duties (for example, completing inspections and investigations). The audit team also examined if roles and responsibilities pertaining to OHS were clearly documented and communicated for these sites. To make this assessment, the auditors reviewed the Department's OHS Governance Framework and other supporting documentation, interviewed members of the various governance committees, local OHS representatives, ECCC executives, OHS leaders, managers and supervisors and employees and conducted site visits.

Why is it important? Under section 136 of the CLC, every employer must designate an OHS representative for work places at which there are fewer than 20 employees. The representative, who is designated in lieu of a local committee, is responsible for the same requirements, including conducting investigations and inspections and for addressing complaints brought to his or her attention.

What we found

In each of the work sites with fewer than 20 employees visited, ECCC has appointed an OHS representative, as required under the CLC. While the Department has developed general policies and direction on OHS, it is unclear whether they apply to sites with fewer than 20 employees. Specific areas noted by the audit team include the following.

- There is unclear direction on the frequency and requirements related to inspections. In some instances, sites conducted monthly inspections. For example, at one site with four people, they inspected one cubicle per month.
- Employees responsible for the areas under review conduct the inspections for these sites. As a result, there are situations where sites are not subjected to the kind of independent inspections that take place in larger offices.
- Employees are often co-located with other departments or private tenants who represent the majority of employees on-site and have separate OHS committees. Direction and guidance for these sites, including the requirements in these situations, are not well documented or communicated.
- There is a lack of specific direction and guidance on how these sites fit into the larger OHS governance structure, including the role of senior building officer.

In the absence of clear direction for sites with fewer than 20 employees, the audit team observed that each site operates differently. Areas requiring remediation and clean-up, which would be flagged in an independent inspection, went unchecked. This resulted in potentially unsafe working conditions and a higher degree of administrative work than is likely required.

Recommendation 1 – Sites with fewer than 20 ECCC employees

The Chief Human Resources Management Officer should provide clear direction and guidance to OHS sites with fewer than 20 ECCC employees.

Management response

Management agrees with this recommendation.

The OHS Division currently conducts compliance monitoring and works directly with OHS reps in these locations in an effort to strengthen compliance. We currently report to Regional OHS Committees on site compliance four times per year.

We will take steps to improve communication, direction, and guidance to senior building officers, regional OHS committees, site representatives and managers responsible for sites with fewer than 20 ECCC employees.

3.4 Mandatory national training

Findings: The OHS management team has developed and delivers the mandatory OHS training. Despite the efforts of the OHS management team, as of December 2018, 25% of executives, 46% of managers and supervisors and 32% of all employees have not completed the mandatory training.

What we examined

The audit examined if mandatory training was completed as required and if the training provided employees with the information they need. To make the assessment, the audit team reviewed the Department's OHS training database, supporting documentation and reports to the Executive Management Committee (EMC) and interviewed members of the various governance committees, ECCC executives, OHS leaders, managers and supervisors and employees.

Why is it important? Under section 125(1)(q) of the CLC, employers must ensure that employees have the necessary information, training and supervision to perform their work safely. To meet this requirement, ECCC developed national OHS training that is mandatory for all employees (management and non-management). The OHS management team is responsible for developing and delivering the training and tracking overall completion. Branch management is responsible for ensuring that their employees complete the training. In addition to not meeting legislative requirements, if the training is not completed, there is a risk that executives, managers and supervisors and employees may not fully know and understand their responsibilities or key OHS procedures.

What we found

The OHS management team developed and delivers mandatory OHS training. It actively tracks completion rates and reports biannually on the results to the ECCC Executive Management Committee. The OHS team has been active in reminding branches and employees of their responsibility to complete the mandatory training. This is done through regular reports on training completion results presented to the EMC and through email reminders to managers. Employees included in the audit questionnaire note that the training did provide them with adequate information (4.2/5).



Despite the OHS team's efforts, in 2017, 44% of executives had not completed mandatory OHS training. As shown in the pie chart, that number improved to 25% by December 2018. While this represents a significant improvement and reflects the efforts of the OHS team, 54 of 220 executives have yet to complete the mandatory training.

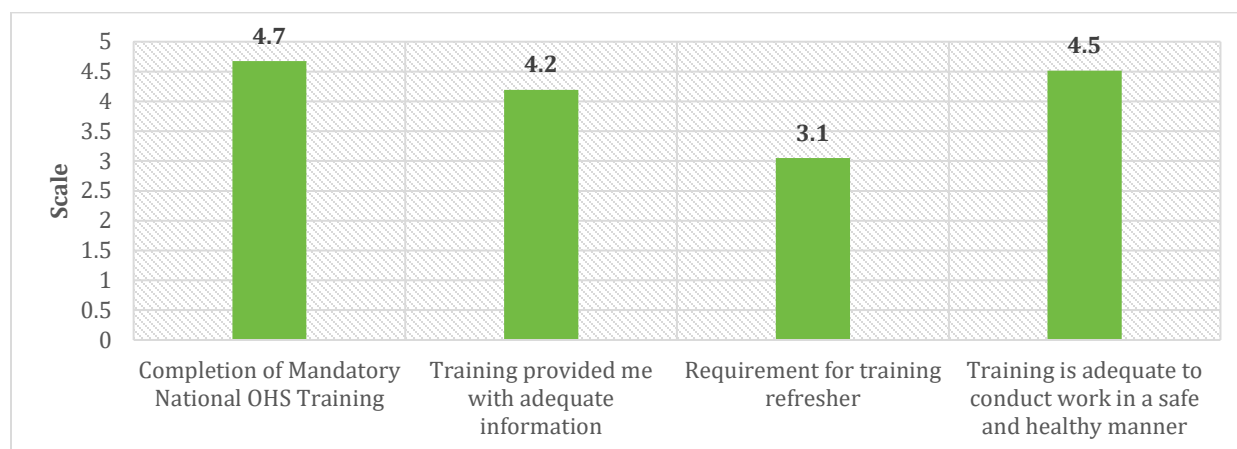
While outside the scope of the audit, it is important to note that 118 of 220 (46%) executives have not completed mandatory course on Prevention of Violence.

As of December 31, 2018, 618 (46%) of supervisors and managers had not completed the mandatory training. This represents an improvement from 51% in 2017. Employee training completion rates improved from 40% in 2017 to 32% in 2018. While this is a notable improvement, 1,653 of the 5,166 ECCC employees in 2018 had yet to complete the mandatory training.

What we heard from employees

As Figure 6 shows, a majority of employees feel that they have completed the required occupational health and safety training. They also feel that the training was adequate enough to allow them to perform their duties in a safe manner. Most employees also think that the training provided them with adequate information. Some employees expressed the desire for refresher training, because there have been changes in the policy and the operating environment since they completed the training.

Figure 6: mandatory national training – employees



Recommendation 2 – Mandatory training

The Chief Human Resources Management Officer should remind executives who have not completed the mandatory training of the requirements and on a periodic basis, provide the Executive Management Committee with a list of the executives who have not completed the required training.

Management response

Management agrees with this recommendation.

We will take actions to improve reporting on training requirements for executives to the Executive Management Committee. We commit to providing regular reports and targeted communications to the Deputy Ministers and the associate deputy ministers to bring mandatory training into compliance.

Recommendation 3 – Accountability regarding mandatory training

The Chief Human Resources Management Officer should review options to document the accountability of executives, supervisors and managers to complete the mandatory training and to ensure that all employees have completed the required training.

Management response

Management agrees with this recommendation.

We are currently conducting targeted communications to supervisors and managers who have not yet completed their mandatory training. While this ensures that a supervisor or manager is aware of upcoming training within their area, the importance of taking the training must come from within their respective branch management teams.

This is a shared responsibility and while the OHS Division commits to sharing reports with the Executive Management Committee members, it is imperative that committee members share these reports within their respective management cadre, providing the necessary direction on the importance of ensuring that training compliance is achieved.

In addition, the OHS Division will run quarterly communication campaigns directed at ECCC employees, encouraging awareness and compliance.

3.5 Job-specific training for field and laboratory employees

Findings: Overall, employees indicated that they have received the job-specific training needed to complete their tasks in a healthy and safe manner. However, there is a lack of direction on how branches should track and monitor OHS training.

What we examined

The audit examined job-specific training delivered to employees who work in the field and laboratories. Specifically, the audit team looked at whether training is monitored, completed as required and effective. To make the assessment, the audit team reviewed supporting documentation, interviewed members of the various governance committees, ECCC executives, OHS leaders, managers and supervisors and employees and conducted site visits.

Why is it important? Under section 124(1)(q) of the CLC, employers must ensure that employees have the necessary information, training and supervision to perform their work safely. ECCC is responsible for a wide range of activities that require employees to work in the field and in the laboratories. Additionally, under section 124(1)(z.04) of the CLC, employers are responsible for developing, implementing and monitoring a prescribed program for the prevention of hazards in the work place. This program must be appropriate to the size of the work place and the nature of the hazards in it, and must also provide for the education of employees on health and safety matters.

In the field, employees support a range of activities that include working in close proximity to wildlife, enforcing Canada's environmental regulations with the public, testing automobiles on city and rural routes and collecting samples on the water and underwater. In the laboratories, ECCC employees are required, for example, to work with dangerous chemicals, handle potential contaminated samples and work with industrial machinery. While all roles in a given organization have an inherent health and safety risk, the roles of those in the field and in laboratories pose a higher degree of inherent risk, thus requiring specific training and attention to detail.

What we found

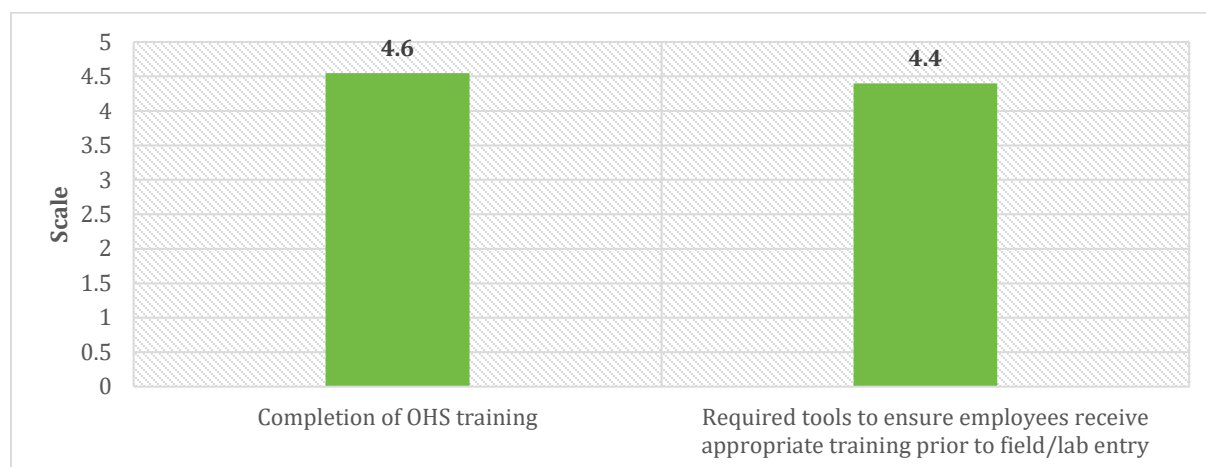
In their responses to the questionnaire, employees indicate that they have the training, tools and equipment to do their job safely. They also said that employees are being reminded to complete training and that employees are reviewing the THA/SWP at minimum on an annual basis. Most importantly, employees noted that they feel safe when performing their duties.

Supervisors responded that they are able to provide needed training to employees. They also indicated that they are able to track employee training and prevent employees from entering the field or laboratories if the training has not been completed. Interviews and responses to the questionnaire from across the country indicate that ECCC has developed a culture committed to OHS. This includes an ongoing emphasis on the completion of training for employees and ensuring that employees have the tools and equipment needed to do their work safely.

Monitoring and tracking job-specific training is the responsibility of individual branches. The audit found that there is no set process for how this training should be monitored and tracked. In the absence of formal direction, the audit identified inconsistencies at the branch and site levels on how job-specific training is being monitored. Some branches have invested in an IT system to track training. Other branches have a designated training coordinator. Some branches track job-specific training using Excel spreadsheets. In other branches, job-specific training is not tracked at all. As a result of the wide variance in approaches and the lack of a formal recording system to track job-specific training, the audit team was not able to conclude with reasonable assurance that job-specific training is completed as required.

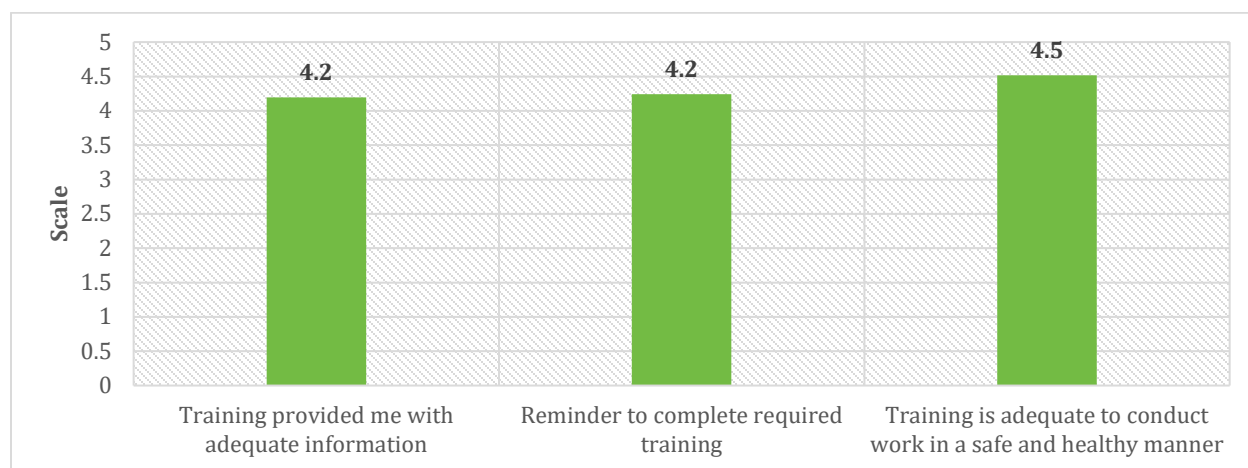
What we heard from supervisors

As shown in Figure 7, the majority of supervisors completed the required OHS training. For the most part, they feel they have the tools needed to ensure that those under their responsibility receive the required level of training prior to undertake laboratory or field work.

Figure 7: job-specific training, field and laboratory – supervisors

What we heard from employees

As indicated in Figure 8, for the most part, employees feel that they have received the training and information needed for them to do their work in a safe and healthy manner. Most employees indicated that they received a reminder to complete the required OHS training.

Figure 8: job-specific training, field and laboratory – employees

Recommendation 4 – Tracking and monitoring job-specific training

The Chief Human Resources Management Officer should address the inconsistencies across branches in tracking and monitoring job-specific training.

Management response

Management agrees with this recommendation.

The responsibility to track and monitor mandatory and job-specific training within branches is a management responsibility. Branches are using different tools to do the required follow-ups with their employees. As the audit points out, these practices are inconsistent. The Human Resources Branch will commit to working with branch heads to leverage best practices and existing tracking and reporting solutions.

3.6 Workplace health and safety inspections

Findings⁴: OHS inspections are taking place as required under the CLC. However, further clarity is needed on the tracking, monitoring and follow-up of inspection recommendations.

What we examined

The audit examined if inspections are taking place as required and if recommendations from those inspections are being implemented. To make the assessment, the audit team reviewed supporting documentation, interviewed members of the various governance committees, ECCC executives, OHS leaders, managers and supervisors and employees and conducted site walk-throughs and inspections.

Why is it important? Under section 124(1)(z.12) of the CLC, employers must ensure that the work place committee or the health and safety representative inspects all or part of the work place each month, so that every part of the work place is inspected at least once a year. At ECCC, local health and safety committees are responsible for conducting these inspections and ensuring that the results are communicated and reported annually to the OHS management team.

What we found

The audit found that inspections are being carried out as required by the local health and safety committees. A review of inspection reports from 2017 and 2018 for the sites visited revealed that:

- inspections are being well documented
- the inspections are actively identifying potential health and safety matters
- where required recommendations for improvement or remediation are being made

⁴ The results presented in this section pertain only to sites with more than 20 employees.

Walk-throughs of the sites with inspectors from the local health and safety committee showed that inspectors are well informed of their roles and responsibilities and that they are able to identify potential areas of health and safety concern.

While recommendations are being made as required, the local health and safety committees highlighted that it can be a challenge to identify who is responsible for addressing the recommendations in shared or common spaces, which adds significant time to the process. Additionally, ultimate responsibility for implementing the recommendations rests with the supervisor of the area. However, if the supervisor does not implement the recommendations, the local committee must escalate the matter within the responsible branch. The audit identified instances where local committees were not escalating long-standing recommendations, citing a lack of clarity in the process and challenges in managing the relationship if an escalation is made. The audit found that the guidance on escalation procedures provided to the local committees should be enhanced to provide further clarity and reminders on the process.

The audit team found that once recommendations are made, local health and safety committees vary nationally in how they track, monitor and follow-up on recommendation implementation. In some instances, committees track the recommendations and follow up regularly on their status as a standing agenda item. Other committees do not track the recommendations, leaving the implementation to the responsible branch. There is a risk that without the active tracking, monitoring and follow-up on recommendations, areas requiring remediation might not be addressed, resulting in future incidents. The audit did not note any specific instances in its sample where recommendations are not being implemented or monitored as part of its sample. However, a more robust process within the OHS Governance Framework that provides clarity on the tracking, monitoring and follow-up on recommendations would improve national consistency and prevent possible future lapses.

3.7 Workplace incident investigations

Findings: OHS investigations are taking place as required under the CLC. However, further clarity is needed on the tracking, monitoring and follow-up of investigation recommendations.

What we examined

The audit examined if investigations are taking place as required and if recommendations from those investigations are being implemented. To make the assessment, the audit team reviewed supporting documentation, interviewed members of the various governance committees, ECCC executives, OHS leaders, managers and supervisors and employees and conducted site visits.

Why is it important? Under section 125(1)(c) of the CLC, the employer must ensure that all accidents, occupational diseases and other hazardous occurrences are investigated, recorded and reported. As prescribed under section 135(7)(e) of the CLC, these investigations must include the participation of the local health and safety committee and as necessary, the NJOHSPC. At ECCC, a Hazardous Occurrence and Investigation Report (HOIR) is completed following each incident. It includes recommendations to prevent a future reoccurrence of the incident.

What we found

The audit found that:

- investigations are being completed as required following an incident
- the results are being documented in HOIRs
- the recommendations made are reasonable and address the incident

Responses to the supervisor questionnaire indicate that overall, they are aware of the requirement to respond to incidents and recommendations (4.6/5). During sites visits, the audit team conducted physical inspections to determine if recommendations are being implemented. For the most part, the audit found that recommendations are being implemented as directed. In some instances, recommendations require a capital investment (for example, building a concrete protective barrier in a spill room) and require the coordination of multiple teams and stakeholders. This can increase the time required to implement the recommendations. The audit identified instances where local committees, as a best practice, have created sub-committees to track, monitor and follow the progress of the recommendations.

Recommendation 5 – Workplace investigations and inspections

The Chief Human Resources Management Officer should:

- a. Revise the OHS Governance Framework to articulate clearly accountability for following up on recommendations from workplace inspections and investigations. This could include escalating mechanisms, to empower local committees
- b. Provide clear direction for the consistent monitoring, implementation and follow-up on investigation and inspection recommendations

Management response

Management agrees with this recommendation.

- a. The clarification of roles and responsibilities was something identified at the 2018 OHS Symposium and one of the priorities that we identified to work on in 2019-2020. The OHS Division will take actions to ensure that we include clearly articulated accountability for following up on recommendations from workplace inspections and investigations following a workplace accident. This will include incorporating strategies that articulate the breakdown of responsibility between senior building officers and the responsible managers of employees. This requirement has been expressed as being particularly problematic for employees who work in another location than their supervisor or manager.
It will also include escalation procedures to ensure that committees feel empowered and effective.
- b. As a best practice noted in the audit report, the OHS Division will introduce a procedure asking each OHS committee to form a sub-committee to ensure that there is dedicated follow-up and tracking of action items as a result of an investigation or workplace inspection. This sub-committee will raise concerns with the committee for discussion, or with the

co-chairs for resolution. This procedure will include a simplified process for OHS reps at sites with fewer than 20 employees. The process will also include the sharing of this follow-up as part of our compliance monitoring.

For this recommendation to be successful, we will need to implement the clarification of roles and responsibilities outlined in Recommendation 5a.

3.8 Data management and integrity

Findings: The data in the OHS data management system is well maintained and accurate. However, the level of analysis could be enhanced to identify and report on geographic and branch OHS trends and areas of high risk.

What we examined

The audit examined if ECCC has developed an effective process and record-keeping system to maintain incident-related data. Additionally, the audit team examined if the Department is actively analyzing the data to identify and communicate high-risk areas nationally, regionally, locally and by branch.

Why is it important? Under section 125(1)(g) of the CLC, employers must keep and maintain health and safety records in a prescribed form and manner. At ECCC, an HOIR is created following an incident. Once the HOIR is completed, the information is manually entered into a database. This includes pertinent information on the nature and location of the incident and remedial actions taken to prevent further occurrences. The OHS team uses this data to meet annual mandatory federal reporting requirements on the number and severity of incidents.

In addition to capturing key information for federal reporting, the data provides an opportunity for the OHS team to undertake an analysis to identify incident-related trends (for example, incident types, timing of the incident and experience level of employee) at the national, regional, local and branch levels. If conducted on a regular basis, this type of analysis can provide valuable insight for teams to proactively manage potential areas of high OHS risk or prevent negative trends from continuing.

What we found

Overall, the audit team found that the OHS management team has developed an effective tool and processes to maintain and retain required OHS-related incident information. Once HOIRs are completed, the OHS team conducts a quality assurance check on the data. The OHS management team then manually enters the information into the OHS database. Backups of the data are being maintained and updated daily. The team has also developed and documented a process to ensure that this occurs and that the data can be accessed as required. The audit team reviewed a sample of completed hard copy HOIR forms and compared the information to what has been entered into the

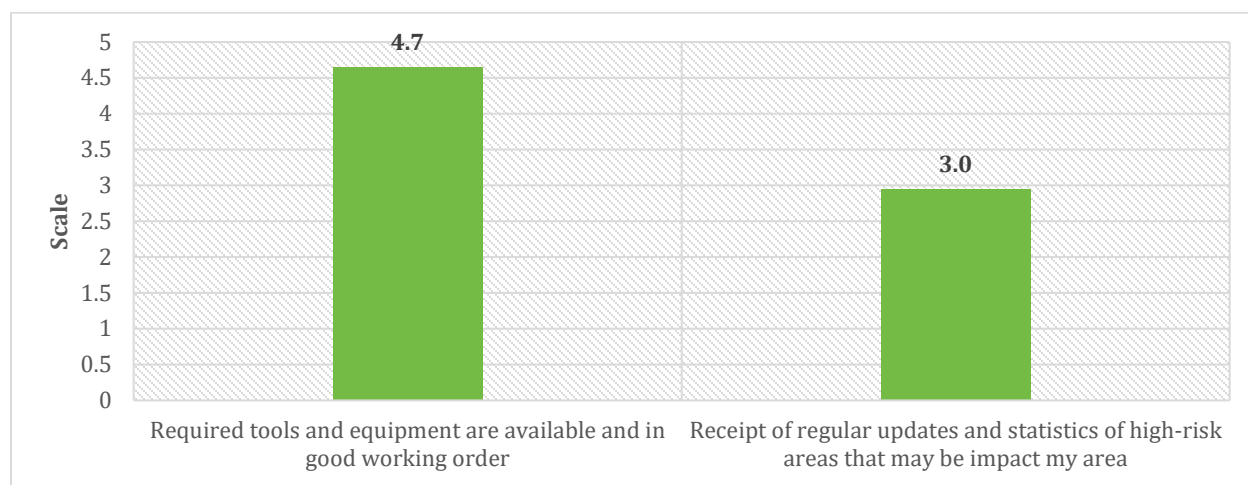
system. The auditors found no instances of incorrectly entered data or missing information in the system.

Due to the sensitive and personal nature of the data included in the OHS database, access to it is restricted to two members of the OHS team. As such, the OHS management team must review and analyze the data included in the database. Regularly analyzing the data would require dedicated resources to support the activity. The audit found that while ECCC is meeting its legislative reporting requirements, there was room for improvement. The Department could conduct more comprehensive trend analyses by region and branch. While some analysis is conducted at the national level as part of biannual reporting, there is no formal process in place to conduct more focused analyses. Interviews with governance committee members and branch executives highlighted that more analysis, including the sharing of best practices, would provide valuable insight into their OHS requirements and areas for further focus. By not leveraging the available data, ECCC is missing an opportunity to identify key trends and issues that could support the prevention of future incidents.

What we heard from supervisors

As shown in Figure 9, in their responses to the questionnaire, supervisors indicate that they have the required tools and equipment are available to them and that they are in good working order. However, supervisors feel that they do not receive updates and statistics on high-risk areas that could impact their own areas.

Figure 9: data management and integrity – supervisors



Recommendation 6 – Leveraging OHS data
The Chief Human Resources Management Officer should strengthen how ECCC leverages OHS data to identify and report on trends and areas of high risk.
Management response
Management agrees with this recommendation. The Human Resources Branch will now dedicate in the OHS Division an oversight advisor whose main focus will be to leverage the OHS data, and identify trends and high-risk areas. The Oversight Advisor will also lead many of the reporting initiatives as a result of this audit. The items identified in the audit report will be the priority items with respect to reporting.

4. Conclusion

Overall, ECCC is meeting its responsibilities under the CLC. Key elements of the management control framework for OHS are in place and functioning effectively. The present audit notes significant improvement since the 2009 internal audit. That said, the recommendations included in the report are intended to present areas for continuous improvement. It is also encouraging to note that in their responses to the questionnaire, employees describe a strong culture of health and safety throughout the Department.

Appendix A: lines of enquiry and criteria

Sub-Objective	Audit criteria
Line of enquiry 1: to assess the clarity and effectiveness of governance processes in place to support the management of occupational health and safety.	
1. Roles and responsibilities pertaining to occupational health and safety are clearly documented, defined, communicated and understood.	<p>1.1 Roles and responsibilities of and among health and safety committees (that is, local, regional and national) are clearly documented, defined, communicated and understood.</p> <p>1.2 Roles and responsibilities for day-to-day management of occupational health and safety are clearly documented, defined, communicated and understood.</p>
Line of enquiry 2: to assess the effectiveness of training (as an internal control) in preventing the occurrence of occupation-related injuries and fatalities.	
2. Training is completed, effective and monitored.	<p>2.1 Training is completed, effective and monitored, as required under the Canada Labour Code.</p> <p>2.2 Training is completed, effective and monitored for positions in high-risk areas (for example, in the field or in the laboratory).</p>
Line of enquiry 3: to assess the effectiveness of controls in place to ensure the identification of remediation of health and safety risks.	
3. Investigations and inspections are taking place as required and identified issues are effectively addressed.	<p>3.1 Controls are established and are effective, to ensure that investigations and inspections are taking place as required.</p> <p>3.1 Controls are established and are effective, to ensure that recommendations from investigations and inspections are implemented.</p>
Line of enquiry 4: to assess the effectiveness of the Department in identifying and proactively addressing areas of high risk to the health and safety of employees and management.	
4. The Department is proactively identifying and communicating healthy, safety trends and high-risk areas at the branch, national, regional and local levels.	<p>4.1 The Department has developed an effective process and system of records to maintain incident-related data.</p> <p>4.2 The Department is actively analyzing the data to identify and communicate high-risk areas nationally, regional, locally and by branch.</p>

Appendix B: occupational health and safety audit methodology and questions

Questionnaires to obtain employee and supervisor perspectives on OHS were given to employees and supervisors at each of the sites visited. Where possible, the questionnaires were administered in person by a member of the audit team. In total, 101 employees and 20 supervisors who work in four of the branches with field and laboratory duties completed questionnaires, namely Enforcement Branch, Canadian Wildlife Services, Meteorological Services of Canada and Science and Technology Branch. The audit team randomly selected the questionnaire respondents from these branches and sites. Respondents were asked to provide their perspectives on a five-point scale as follows:

- 1 = strongly disagree
- 2 = disagree
- 3 = neither disagree nor agree
- 4 = agree
- 5 = strongly agree

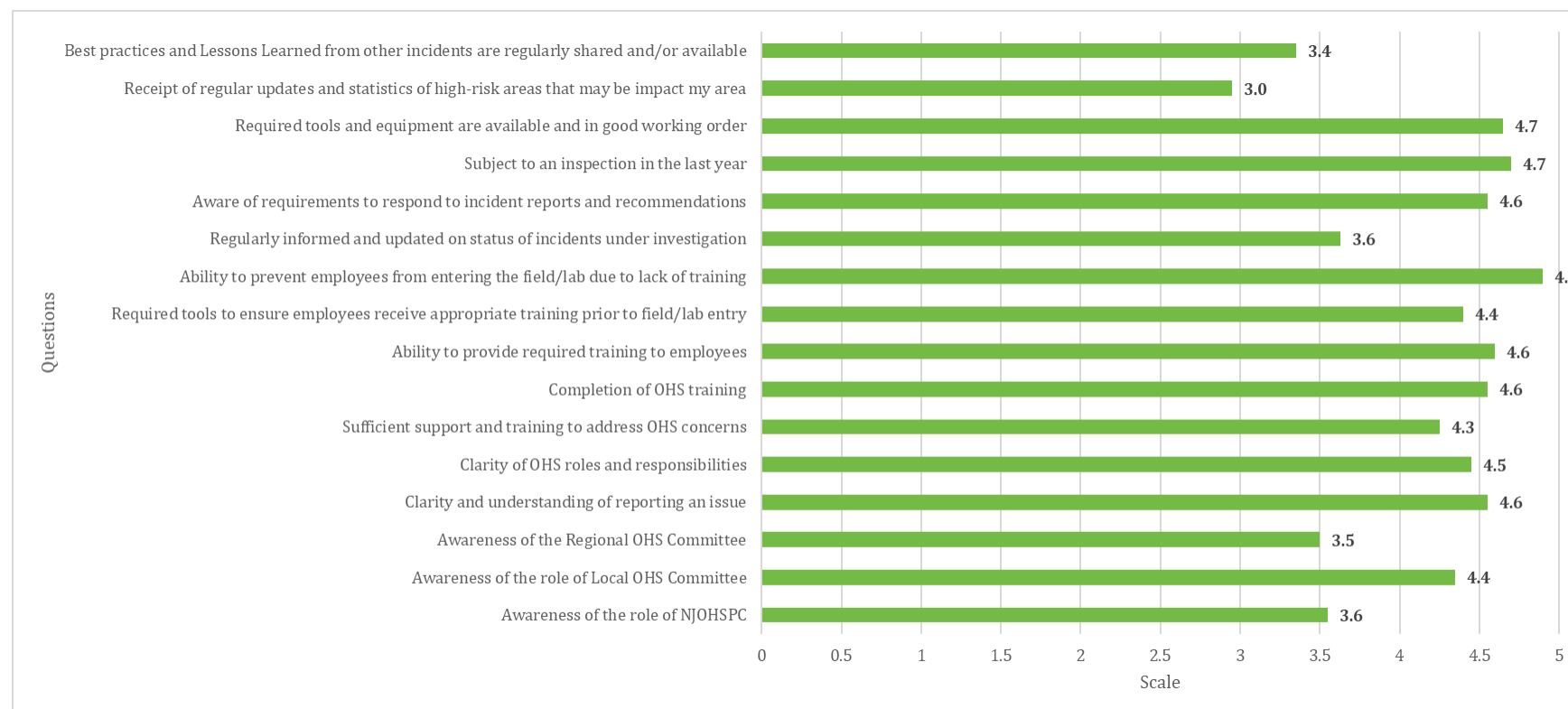
E: Questions to employees

S: Questions to supervisors

Questions	
E/S.01	I am aware of the role of the Joint National Committee on Occupational Health and Safety.
E/S.02	I am aware of the role of my local occupational health and safety committee.
E/S.03	I am aware of the role of my regional occupational health and safety committee.
E/S.04	If I have a health and safety concern, I know how to report the issue.
E.05	In the event of an incident, I know who to contact.
E.06	If I identify issues with training, tools and equipment, I know who to report the issue to.
E.07	If I identify issues with training, tools and equipment, I feel they will be addressed in a timely and effective manner.
E.08	I have completed the mandatory national occupational health and safety training.
E.09	The training provided me with the information I needed.
E.10	I feel I need a refresher since I last completed the training.
E.11	I have been reminded about the need to complete the training.
E.12	I have reviewed the THA/SWP in the past year.
E.13	The THA/SWP is up to date and reflects current practices.
E.14	I have the tools and equipment to conduct my duties safely.

Questions	
E.15	I have the training needed to conduct my work in a healthy and safe manner.
E.16	I feel safe in the conduct of my duties.
S.05	I am clear on my roles and responsibilities as it pertains to OHS.
S.06	I have the support and training required to address OHS concerns that are raised to me.
S.07	I have completed training on OHS relevant to my position.
S.08	I am able to provide required training to my employees.
S.09	I have the tools required to ensure everyone under my purview has the required training before entering a laboratory or the field?
S.10	I am able to stop employees from entering the laboratory or field if they do not have the required training.
S.11	I am regularly informed and updated on the status of incidents under investigations.
S.12	I am aware of the requirements to respond to incident reports and recommendations.
S.13	My area been subject to an inspection in the last year.
S.14	The tools and equipment required are available and in good working order.
S.15	I receive regular updates and statistics of high-risk areas that may impact my area.
S.16	Best practices and lessons learned from other incidents are regularly shared and/or available.

Appendix C: supervisor responses to audit questions on occupational health and safety



Appendix D: employee responses to audit questions on occupational health and safety



Appendix E: occupational health and safety governance structure

